

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**DONALD J. TRUMP FOR PRESIDENT, INC.**

**A.** Full Name (Last, First, Middle Initial)

**CABAL-KESSLER, ANGELA, , ,**

Mailing Address 515 S DIVISION ST

City

AUDUBON

State

IA

Zip Code

50025

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

COLLABORATIVE MGMT PLASTICITY/KES

Occupation

CONSULTANT

Receipt For: 2016

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

**Transaction ID : SA17A.14683**

Date of Receipt

MM / DD / YYYY  
09 / 13 / 2016

09

13

2016

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)

**CABELL, DAVID, , ,**

Mailing Address 6930 SARANAC LANE

City

MATTHEWS

State

NC

Zip Code

28105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

**Transaction ID : SA17A.14685**

Date of Receipt

MM / DD / YYYY  
09 / 20 / 2016

09

20

2016

Amount of Each Receipt this Period

100.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)

**CABOT, MICHELE, , ,**

Mailing Address 1342 SNYDER ROAD

City

GREEN LANE

State

PA

Zip Code

18054

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

**Transaction ID : SA17A.14687**

Date of Receipt

MM / DD / YYYY  
09 / 01 / 2016

09

01

2016

Amount of Each Receipt this Period

50.00

☐ Memo Item

**Subtotal Of Receipts This Page (optional)**.....

400.00

**Total This Period (last page this line number only)**.....